

HIPAA Transaction Rule County Business Associate Compliance Plan for Home and Community Based Waiver Programs

Revised Instructions (5-27-03)

County agencies that administer the Home and Community Based Waiver (HCBW) Programs have been determined for HIPAA purposes to be business associates of the Department of Health and Family Services. As such they are required by the Business Associate Agreement to the State-County contract to comply with the HIPAA Electronic Transactions and Code Sets rule by October 16, 2003. Each county agency is also required by DSL Numbered Memo 2002-23 to submit to the Department a plan for its compliance. Providing the information requested in the plan format and submitting it to your Area Administrator by June 16, 2003 will satisfy that requirement. (The BA Agreement also names COP, but DDE Memo 2003-03 removes the requirement for COP.)

County Agency Name the agency that is administering the HCBW Programs.

County Compliance Contact Name the person who should be contacted about the agency's compliance. List his or her title, phone number and email address.

General Approach

Check approaches planned: Check each compliance approach that the agency plans to use. Multiple approaches may be checked.

Narrative: Write an explanation of the compliance approach(es). Describe the interaction of multiple approaches, if used. Identify specific vendors or other business partners that will be involved. Provide timeframes for key milestones such as software acquisition or internal development. Describe any partnerships with other agencies.

Testing Transactions must be tested both internally and with business partners. Seven types of testing have been identified. Certification is the independent assessment of transaction compliance via a third party. Testing with external partners can be reduced by using certification for many of the testing types. See the WEDI SNIP web site at http://snip.wedi.org/public/articles/Testing_whitepaper082602.pdf for a white paper on testing and certification.

Describe in this section of the plan what internal and external testing you will do and how it will be done.

Certification Describe here if and how you will use certification as part of your testing strategy. Name the vendor or product you will use for certification and the type of testing you will use certification for. See the attached paper for a listing of certification vendors.

Milestones Enter the start and end dates for each milestone. Internal testing is any testing you will perform of software involving standard HIPAA transactions where the testing does not involve external partners (other than the vendor providing the software, if

relevant). Partner testing is testing with parties other than within your agency or the vendor that provided the solution. According to the federal Administrative Simplification Compliance Act, testing must begin by April 16, 2003. Because internal testing logically precedes external testing, if internal testing is planned it should start not later than this date. Some solutions (such as use of third party administrators or clearinghouses) will not involve internal testing. In these cases no dates for the internal testing milestone are needed. Implementation is the period when testing is completed and actual production transactions are being run, but before the October 16, 2003 compliance date. This will hopefully be at least a couple of weeks.